# FORM D

Mail Processing Section

JUL 2 2 2008

## 1433883 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

Washington, DC UNIFORM LIMITED OFFERING EXEMPTION

**OMB APPROVAL** OMB Number:.....3235-0076 Expires: ......July 31, 2008 Estimated average burden hours per form ......16.00 SEC USE ONLY Prefix Serial 1 **DATE RECEIVED** 

Name of Offering	(☐ check if this is an ame	endment and name l	has changed, and ir	idicate change.)			
Limited partnership	interests of GovPlus Mas	ter Fund, L.P.					
Filing Under (Check b	ox(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(6)		DE
Type of Filing:	☐ New Filing						
		A. BASIC	DENTIFICAT	ION DATA	 	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	    [[]
Enter the information	ation requested about the is	ssuer					
Name of Issuer	check if this is an ame	ndment and name h	as changed, and in	dicate change.			
GovPlus Master Fun	d, L.P. (formerly known a	s Norcom Capital	GovPlus Master Fu	ınd, L.P.)	_ 080	56780	
Address of Executive	Offices		(Number and Stree	et, City, State, Zip Co			cluding Area Code)
c/o NorCap Investme 75240	ent Management, L.P., Tw	o Lincoln Center,	5420 LBJ Freeway,	Suite 525, Dallas T	X (972) 701-88	315	
Address of Principal C	Offices		(Number and Stree	et, City, State, Zip Co	de) Telephone N	lumber (Inc	cluding Area Code)
(if different from Exec	utive Offices)					DD/	OCESSED-
Brief Description of Br	usiness: Private Inve	stment Company				>	
Type of Business Org	anization					Jt	JL 2 5 2008
	corporation	☐ limited p	artnership, already	formed	other (please s	sp <b>epify</b>	ISON REUTERS
	business trust	limited p	artnership, to be for	med	Cayman islands L	imited Yan	PAN KEDIEKS
			Month	Year			
Actual or Estimated D	ate of Incorporation or Org	anization:	0 0	0	0 🗀 Ad	ctual	Estimated
Jurisdiction of Incorpo	ration or Organization: (Er	nter two-letter U.S. F	Postal Service Abbre	eviation for State;			,
		CI	N for Canada; FN fo	r other foreign jurisdi	ction) [	DE	

### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC II	DENTIFICATION DAT	Α	
<ul><li>Each beneficial owr</li><li>Each executive office</li></ul>	ne issuer, if the isso ner having the pow der and director of	uer has been organized wit ver to vote or dispose, or di		of, 10% or more of ging partners of par	a class of equity securities of the issuer; tnership issuers; and
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, i	f individual):	NorCap Investment N	Management, L.P.		-
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	de): Two Lincoln Cente	er, 5420 LBJ Free	way, Suite 525, Dallas TX 75240
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ Investment Manager
Full Name (Last name first, i	f individual):	Norcom, David R.			
Business or Residence Addi Freeway, Suite 525, Dallas		Street, City, State, Zip Cod	de): c/o NorCap Invest	ment Managemer	nt, L.P., Two Lincoln Center, 5420 LBJ
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Baggett, Carl Y.			
Business or Residence Addr Freeway, Suite 525, Dallas		Street, City, State, Zip Cod	le): c/o NorCap Invest	ment Managemer	nt, L.P., Two Lincoln Center, 5420 LBJ
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	GovPlus Offshore Fu	und, Ltd.		
Business or Residence Addi Freeway, Suite 525, Dallas		Street, City, State, Zip Cod	le): c/o NorCap Invest	ment Managemer	nt, L.P., Two Lincoln Center, 5420 LBJ
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):	GovPlus Fund, L.P.			
Business or Residence Addi Freeway, Suite 525, Dallas		Street, City, State, Zip Cod	le): c/o NorCap Invest	ment Managemer	t, L.P., Two Lincoln Center, 5420 LBJ
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):			· • · · · · · · · · · · · · · · · ·	
Business or Residence Addi	ess (Number and	Street, City, State, Zip Cod	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING												
					-								
<b>1</b> . I	las the issue	er sold, or	does the is	suer inten			edited inve pendix, Co					☐ Yes	⊠ No
2.	Vhat is the r	ninimum in	vestment t	hat will be	accepted	from any i	ndividual?					\$1,	*000,000
	* General Partner may accept investments in a lesser amount at its discretion												
3.	Does the offe	ering permi	it joint own	ership of a	ı single uni	it?					•••••	⊠ Yes	i □ No
; ;	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full N	ame (Last n	ame first, i	f individual	)									
Busin	ess or Resid	lence Addr	ess (Numb	per and St	reet, City,	State, Zip	Code)						
Name	of Associat	ed Broker	or Dealer	·									
	in Which P Check "All S												☐ All States
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רן [וג	[IN]	□ [IA]	[KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[IM]	☐ [MN]	☐ [MS]	[MO]	
□ [M	Π [NE]	□ [NV]	□ [NH]	□ [NJ]	□ (NM)	□ [NY]	☐ [NC]	□ [ND]	□ (OH)	□ [OK]	□ [OR]	[PA]	
□ (R	] 🔲 [SC]	[SD]		□ [TX]	[UT]	[[VT]	□ [VA]	□ [WA]	[W√]	□ [WI]	[WY]	[PR]	
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Busin	ess or Resid	lence Addr	ess (Numb	per and St	reet, City,	State, Zip	Code)						
Name	of Associat	ed Broker	or Dealer										
	in Which P Check "All S												☐ Ali States
□ [A		□ [AZ]			•						☐ [HI]	□ [ID]	
	[IN]	□ [IA]	□ [KS]	□ [KY]	□ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	☐ [MO]	
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Full N	ame (Last n	ame first, it	f individual	)									
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	reet, City, S	State, Zip (	Code)						
Name	of Associate	ed Broker	or Dealer										
	in Which P								*****				☐ All States
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	[N] 🔲	☐ [iA]	☐ [KS]	□ [KY]	[LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ (MS)	☐ [MO]	
□ {M	Π 🔲 (NE)	□ [NV]	□ [NH]	□ (NJ)	[NM]	□ [NY]		□ [ND]	□ [OH]		[OR]	□ [PA]	
□ (R	] 🔲 [SC]	☐ (SD)	□ [TN]	□ (XT)	[UT]	□ [VT]	[AV]	[AW]	□ [WV]	□ [WI]	□ [WY]	□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security □ Preferred ☐ Common Convertible Securities (including warrants) ......\$ Partnership Interests.....\$ 500,000,000 )......**s** Other (Specify) \_ Total..... 500,000,000 94,943,709 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors 94,943,709 Non-accredited Investors N/A N/A N/A N/A \$ Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Types of **Dollar Amount** Type of Offering Security Sold Rule 505 ..... N/A Regulation A..... N/A N/A **Rule 504** Total...... N/A \$ N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... Printing and Engraving Costs.....

Total

)......

5,000

5.000

Other Expenses (identify)

4	b. Enter the difference between the aggregate offering	price given in response to Part C-					<del>-</del>
	Question 1 and total expenses furnished in response to P "adjusted gross proceeds to the issuer."			3		<u>\$</u>	499,995,000
5	Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in response to the interest of the interest	ny purpose is not known, furnish ne total of the payments listed mus	an st equal	Payme Office Directe Affilia	ers, ors &		Payments to Others
	Salaries and fees			<u>\$</u>			\$
	Purchase of real estate			\$			\$
	Purchase, rental or leasing and installation of mac	hinery and equipment		\$			\$
	Construction or leasing of plant buildings and facil	ities		\$			<u>\$</u>
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asso pursuant to a merger	ets or securities of another issuer		\$			\$
	Repayment of indebtedness			\$			\$
	Working capital			\$		$\boxtimes$	<b>\$</b> 99,995,000
	Other (specify):	<u> </u>		\$			\$
				\$			\$
	Column Totals			\$		$\boxtimes$	\$ 499,995,000
	Total payments Listed (column totals added)				3 <u>\$ 4</u> 9	99,9	95,000
		D. FEDERAL SIGNATUR	RE				
CO	is issuer has duly caused this notice to be signed by the urnstitutes an undertaking by the issuer to furnish to the U.S. the issuer to any non-accredited investor pursuant to para	Securities and Exchange Comm	n. If this ission, u	notice is filed u pon written requ	nder Rule 5 lest of its st	i05, the aff, the	e following signature e information furnished
	uer (Print or Type)	Signature			Dat		1 21. 2000
	vPlus Master Fund, L.P. me of Signer (Print or Type)	Title of Signer (Print or Type)					uly 21,2008
	rl Y. Baggett	Authorized person					
		·			•		

		E. STATE SIGNATURE					
1.		Presently subject to any of the disqualification	☐ Yes ⊠ No				
		See Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertake (17 CFR 239.500) at such times as required.	es to furnish to any state administrator of any state in which this red by state law.	s notice is filed a notice on Form D				
3.	The undersigned issuer hereby undertake	es to furnish to the state administrators, upon written request, in	nformation furnished by the issuer to offerees.				
4.	The undersigned issuer represents that the Exemption (ULOE) of the state in which the of establishing that these conditions have	ne issuer is familiar with the conditions that must be satisfied to his notice is filed and understands that the issuer claiming the a been satisfied.	be entitled to the Uniform limited Offering availability of this exemption has the burden				
	ssuer has read this notification and knows the rized person.	contents to be true and has duly caused this notice to be signe	ed on its behalf by the undersigned duly				
Issuer (Print or Type)		Signature	Date				
GovP.	lus Master Fund, L.P.	CRI Vyieth	July 21,2008				
	of Signer (Print or Type)	Title of Signer (Print or Type)					
Carl Y	Y. Baggett	Authorized person of NorCap Advisors, LLC the	Authorized person of NorCap Advisors, LLC the general partner of NorCap Management,				

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	,			AP	PENDIX					
			·							
1	4	2	3			4		5		
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of ii ∙arnount purc (Part C	nvestor and chased in State - Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)		
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
со										
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DE	_									
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				API	PENDIX						
1		2	3			4		5	;		
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	(Part E –	No		
NY											
NC											
ND											
ОН											
ок											
OR											
PA											
RI											
sc								i			
SD											
TN											
TX		х	\$500,000,000	2	\$94,943,709	0	\$0		×		
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